

## Matching Funds Application Cooperative Forestry Assistance Act

Form 4300-058 (R 3/04)

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**Notice:** Completion of this form is required by the Department when applying for matching funds under the Cooperative Forestry Assistance Act as amended by Forest Stewardship Act of 1990. Failure to submit or fully complete this form means the request for a volunteer fire assistance grant cannot be considered. Personally identifiable information requested on this form is not likely to be used for purposes other than that for which it is originally being collected.

### Instructions For Volunteer Fire Assistance (VFA) Application:

1. Fill out form completely. Answer every question. Be certain that figures used are recent and reasonably accurate. Be brief, yet complete in answering questions requiring a statement. Initial screening of applications will be made solely from the information given on the application. Please respond only with one answer for each yes or no question.

2. Attach additional narrative or other supporting material as appropriate to define better the project and/or need.

3. Mail application to this address **by JUNE 1, 2004:**

VFA GRANT MANAGER - CF/8  
DEPARTMENT OF NATURAL RESOURCES  
PO BOX 7921  
MADISON WI 53707-7921

**Leave Blank -- DNR Use Only**

Postmark Date

Score

### Part 1: Applicant Information

If your address has changed in the past year, check this box: ☐

Name of County Fire Association			Name of Individual Authorized to Act on Behalf of Applicant	
Street or Route			Title	
City	State	ZIP Code	Business Telephone Number	Fax Number
County		Home Telephone Number		Email Address
Applicant State Senate District (You will find this information at website: <a href="http://www.legis.state.wi.us/waml/">www.legis.state.wi.us/waml/</a> )				Applicant State Assembly District

### DNR Contact Information

Name of Local DNR Forester/Ranger	DNR Region	Local DNR Forester/Ranger Telephone Number
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### Part 2: Grant Eligibility Priority

County Association Applicant: Do 50% or more of your member fire departments serve the areas designated by DNR as the cooperative (CO-OP) forest fire control areas? (See map in application packet) ☐ Yes (50 points) ☐ No (0 points)

Attach a copy of the association's constitution, bylaws, and a list of member fire departments (documents not required IF an application was previously submitted).

Number of communities served by this county association:

Cities: \_\_\_\_\_ Villages: \_\_\_\_\_ Towns: \_\_\_\_\_ Tribal Governments: \_\_\_\_\_

Did your County Fire Association receive VFA grant funds last year? ☐ Yes (0 points) ☐ No (30 points)

Does this application request Personal Protective Equipment? ☐ Yes (15 points) ☐ No (0 points)

### Part 3: Source of Applicant Share

Tax Appropriation	Loan	Fund Raising
\$	\$	\$
Other (Explain)		

<b>Part 4: Breakdown of Grant Funding Requested</b>	
	<b>Total Cost</b>
<b>Personal Protective Equipment:</b> Personal safety equipment-wildland fire and structural; given high priority and must meet NIOSH (National Institute of Occupational Safety and Health), NFPA (National Fire Protection Association) or OSHA (Occupational Safety and Health Administration) standards, Fire protective clothing-Nomex, PASS devices, breathing apparatus; ( <i>ineligible - thermal imaging devices</i> )	\$
<b>Organization:</b> New fire department start-up efforts (first three years only).	\$
<b>Communication Equipment:</b> Radios/Pagers--must be compatible with the state governmental radio plan; multi-channel radios should include county fire and FIRECOM frequencies; WISTAC and MARC compatibility recommended. Radios should also meet the federal narrowband frequency standard.	\$
<b>Prevention Projects:</b> Posters, Handouts, Smoke detectors, Numbering systems, Urban interface videos and brochures	\$
<b>Dry Hydrants (water points):</b> If offered a grant agreement, permits, if necessary, or letter(s) from landowner(s) will be required. (Number of dry hydrants _____)	\$
<b>Equipment:</b> Pumps, Hoses, Class A foam/foam equipment, Structural and Wildland tools, Equipment	\$
<b>Training:</b> Videos, Instructional materials; Structural, Wildland and Incident Command System certified training and tuition for attending classes	\$
<b>Project Total</b>	\$
<b>X Grant Share</b>	X .50
<b>TOTAL GRANT FUNDING:</b> Maximum grant award: \$10,000; to receive the maximum grant award, a project must have at least \$20,000 in eligible project costs. Minimum grant award: \$1,500; to receive the minimum grant award, a project must have at least \$3,000 in eligible project costs.	\$

**Part 5: Project Description**  
Describe the grant request. Provide an **itemized list** of purchases in terms of quantities, estimated costs, etc. Use extra sheets as necessary to describe the project adequately.

<b>Part 6: Certification</b>	
I certify, to the best of my knowledge, that:	
a) The information on this application is true and correct, b) The county association has the ability and intention to finance and execute this project if a grant is approved, c) The county association's type of protection area listed is true and correct, d) All fire departments included as county association members on this application are not requesting grant funds under any other VFA grant application this grant cycle, e) This grant request meets applicable National Fire Protection Association (NFPA) and COMM-30 standards, and f.) The local cost share monies are not proceeds of any other federal grant program.	
Typed or Printed Name of Authorized Representative	Title of Authorized Representative
Signature of Authorized Representative	Date